DOCUMENT RESUME

ED 208 320 CG 015 493

AUTHOR Haemmerlie, Frances M.; Montgomery, Robert L.
TITLE Role Conflict for Aides in a Homemaker Aid Program for the Rural Frail Elderly.
INSTITUTION Missouri Univ., Columbia.
SPONS AGENCY Administration on Aging (DHEW), Washington, D.C.
PUB DATE Apr 81
GRANT AoA-07-AT-010
NOTE 11p.; For related document, see CG 015 492. Paper presented at the Annual Convention of the Southwestern Psychological Association (27th, Houston, TX, April 16-18, 1981).

EDRS PRICE MF01/PC01 Plus Postage.
DESCRIPTORS Community Health Services; *Helping Relationship; Home Programs; Human Services; Older Adults; Participant Satisfaction; *Role Conflict; *Role Perception; Rural Population; Social Services; *Staff Role; *Stress Variables; *Visiting Homemakers

ABSTRACT

The importance of programs that help the elderly to continue living at home has been clearly established. Homemaker aides in these programs generally provide homemaking assistance and psychological support to their clients, but may experience role conflict as a result of responding directly to the demands of both clients and the program. Clients (N=27), aides (N=19), and staff members (N=10) of the Senior Services Council (a program to assist the frail elderly in light household chores) provided answers to 18 Likert-type items about situations that might create potential conflict for the aide. Results indicated that staff members considered the potential problems to be more significant than the aides; the aides regarded the potential problems to be more significant than the clients. For all three groups, the primary problem was that the client tried to get the aide to talk about herself and other clients. The perception of a test item as a problem depended upon the rater, i.e., staff member, aide, or client, of the item. These findings suggest that the aide's position is not well understood by the aides, the staff, or the clients. (NRB)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED208320

Role Conflict for Aides in a Homemaker Aide Program for the (Rural) Frail Elderly

Frances M. Haemmerlie

Robert L. Montgomery

University of Missouri-Rolla

AUTHOR'S NOTE: This investigation was supported by research funds (#07-AT-010) received from a Title IV Training Grant that the University Of Missouri Joint Centers for Aging Studies received from the Administration on Aging. The authors gratefully acknowledge the assistance and the cooperation received from Mrs. Margaret Cossette and Kay Hawkes of the Senior Services Council, and also that of Mrs. Rebecca Walstrom who helped collect and code the data.

CG 015493

U.S. DEPARTMENT OF EDUCATION
NATIONAL INSTITUTE OF EDUCATION
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

X This document has been reproduced as received from the person or organization originating it.

☐ Minor changes have been made to improve reproduction quality.

• Points of view or opinions stated in this document do not necessarily represent official NIE position or policy.

"PERMISSION TO REPRODUCE THIS MATERIAL HAS BEEN GRANTED BY

Frances Haemmerlie

TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)."

The importance of home maintenance services that help the elderly stay out of institutions and nursing homes has been clearly established. (Butler and Lewis, 1977; Smith, 1977) The homemaker aide programs that resulted from the creation of Title XX of the Social Secruities Administration in 1975 have provided a variety of such services for the elderly across the country. The individual homemaker aides in these programs perform such basic homemaking duties as cleaning the client's kitchen and bathroom, doing laundry, changing bed linens, planning meals, shopping for food and preparing meals. Additionally, these aides may offer psychological support. In fact, providing the latter when a client feels lonely or depressed can be of major significance since at times a client's inability to gain strength and independence may be a result of a mental attitude rather than a physical problem. However, it is possible the homemaker aides in these programs may experience role conflict as a consequence of being in the position of having to both respond directly to the demands of the clients and also to the demands of the overall program goals (Friedman, 1977) as specified by the official program guidelines and evaluated by the program staff.

The present study represented an attempt to assist a large homemaker aide program in rural Missouri to assess the human relations problems (e.g., role conflict) that the aides in the program might be experiencing. This was done by independently assessing and comparing the views of the clients, aides and staff with respect to the types of problem situations they felt the aides encountered in the program.

Method

Subjects were the entire staff (ten) of a large homemaker aide program in south central Missouri, a random sample of 19 aides employed by the program and a selected sample of 27 clients serviced by the program. In the three years since being organized, this program had grown from one aide in one county to over

130 aides providing homemaker services to over 700 clients in 17 rural Missouri counties. The purpose of the program was to assist the frail elderly in light household chores in order that they could remain independent and continue to live at home. Funding of the program came mainly from Title XX of the Social Security Administration. The ages for the 27 clients interviewed ranged from 58 to 90 years of age with the mean age being 78.7 years.

During the Spring and Summer months of 1980, interviews were conducted by a trained research assistant in which clients, aides, and staff members were asked to provide answers to 18 Likert type items which concerned situations that might provide conflict for the aides. Subjects were to indicate whether or not they thought the situation described in each item was "never," "sometimes," or "always" a difficult situation to handle for the homemaker aides on a one to five point scale. Because replies were given orally to each question, answers were first recorded, then coded, and finally scored according to the following scheme. If the client did not respond, a score of zero was received. Responses of "never," "very rarely," "no," or "no problems," were scored with a weight of 1. "Rarely," "not often," and "not too much," received a weight of 2. "Sometimes" or "occasionally," received a weight of 3. "Frequently," "usually," "often," and "fairly frequently," or "fairly often," received a weight of 4. "Very frequently" or "always" received a weight of 5.

Items for the scale came from several extensive interviews with aides and members of the staff in which they were asked to describe frequent problems that an aide might encounter. From these interviews, a 20 item scale was created which was pre-tested on 120 aides. From the results of the pre-test, it was apparent that five were poor items, in that they were not endorsed with any regularity by the aides, and thus were dropped form the questionnaire. Three new items were added, however, which were gleaned from comments written by the aides

to an open ended question asking for "other problems" than those listed on the 20 item questionnaire.

Results

A 3 X 18 (Clients, Aides. Staff X items) analysis of variance indicated that staff considered the problems for the aides to be significantly greater than did the aides, and the aides significantly greater than did the clients ($F = 66.23$, d.f. = 2, 53, $p < .001$). Moreover, some of the items constituted a significantly ($F = 29.00$ d.f. = 17, 902, $p < .001$) greater problem than others. Of greatest interest, however, was a significant Items X Clients, Aides, Staff interaction ($F = 8.44$, d.f. = 34, 902, $p < .001$). This indicated that, overall, whether or not an item was perceived as a problem depended a great deal upon whether or not it was the staff, aides, or clients rating that item.

Table 1 shows the mean ranking of the 18 items by staff, aides, and clients in rank order going from most important to least important. Because of the large number of multiple comparisons made, the Tukey test, a fairly conservative range test, was used to determine whether or not staff, aides, and clients differed significantly from one another on each item.

For all three groups the number one problem was "client tries to get aide to talk about herself and other clients." Aides, however, saw this as significantly less of a problem than did clients and staff. Also considered important by all three groups were "client tries to get aide to talk about religion and politics" and "Doctors tell client, 'its just something you will have to live with.'"

Staff and aides both saw "client tries to get aide to accept gift" as constituting a difficult situation, but clients did not. Staff considered "client wants aide to do more than aide is supposed to do, client gets upset over unavoidable schedule changes, and client engages aide in inappropriate conversation topics for a small town" as constituting difficulty for the aide, but aides and

clients did not. Both staff and aides rated "client's forgetfulness" as being important (staff more so than aides), but clients did not.

Overall, the remaining eight items were rated less important by all groups. Staff and clients thought "clients not liking to sign time sheets" constituted a problem. Aides did not. "Aide wishing to discuss religion and politics with client" was perceived as being a significant problem by the staff, but not by clients. Aides were in between staff and clients. Similarly, staff saw "aide wishing to talk about herself and other clients" and "clients dislike signing a receipt for cash form" as being significantly more important than did clients. Aides again were in between. "Previous aide providing supplies" was considered important by staff, next most important by clients, and least important by aides. None of the three groups saw "clients accuse aides of being forgetful" as an important problem.

Considered extremely unimportant by clients, but fairly important by aides was "client's smoking is annoying" and "aides dislike having to use clients' foodstamps." Members of the staff scored in between aides and clients on these two items.

Discussion

The significant group x item interaction indicated that clients, aides and staff had frequently discrepant perspectives concerning what consituted a difficult situation for the aides. These differences suggest that the aide's position is not well understood by either the aides, staff, or the clients. Follow up tests indicated that this was indeed the case. Certain specific items were seen by both staff and aides but not by the clients as providing difficulty for the aides. In this regard, the clients did not see that trying to give the aide a gift or their own forgetfulness could cause a problem situation for the aides. This latter finding also suggests that the clients were not particularly sensitive

about the effects of some of their behaviors in creating problems for the aides. Other problems were seen only by the aides as providing significant difficulty, (e.g. not liking to fill out time sheets, using food stamps for client). Finally, the staff saw other specific situations as problematic for the aides (e.g. clients want aide to do more than aide is supposed to do, and client gets upset over unavoidable schedule changes). Both in general, and on specific items, these differing viewpoints between the aides, staff, and clients supports the hypothesis that the aides most likely experience role conflict.

On the other hand, all three groups did agree that some specific items were difficult for the aid (e.g. client tries to get aide to talk about herself and other clients and/or religion and politics, and doctors tell clients "it is something you have to live with"). While the three areas where significant agreement existed among the three groups undoubtedly represent situations that are difficult for the aides to deal with, the issues that we have isolated as "role conflict" situations (i.e., instances where two or more of the groups involved differ significantly from one another in their perceptions of difficulty provided for an aide) most likely provide an even greater amount of strain for the aide. In the former case, where concensus exists between all three groups, it is easy for all parties concerned to know what is causing feelings of strain, to empathize, and to know to what to attribute these feelings. In the latter case, i.e., role conflict situations, where concensus does not exist with regard to the existence of a difficult situation, this clearly would not be the case, and these divergent prospectives would contribute even further to the role strain experienced by the aide.

In general, the staff perceived the 18 problem areas encountered by aides as being far more important in providing conflict for the aides than did the aides, and the aides thought them to provide more conflict than did the elderly clients. This trend could be a result of several factors. First, none of the items tested came from the clients. Only viewpoints of staff members and aides were solicited during the initial pretest phase. This explanation would not, however, explain why the staff scored higher than the aides. Although items included were not based on initial interviews with clients, an attempt to get this information for inclusion in future studies was made by asking a 19th question which specifically asked all respondents to indicate "other problem situations". Although the staff and aides provided many comments, only one client answered this question and with a negative comment. This client indicated that she would "like a better lady. One that knows what house cleaning is."

A second explanation for the staff being most concerned and the clients least concerned about conflict situations for the aides might relate to "breadth of view" of the program that the three groups possess. Staff members would have the broadest view, aides the next most, and clients the least. Members of the staff have contact with more that 120 aides who service over 700 clients in the program. Aides, on the other hand, only have contact with 3 or 4 clients, and clients see only one aide in the program. Additionally, it is likely that the three groups would differ in level of sophistication and the ability to consider a variety of general abstract and specific issues. Most of the staff possessed college degrees. Aides generally had high school diplomas. Most of the clients, on the other hand, were not high school graduates.

Conclusions

It would appear from the results of this study that aides in this program experienced role conflict. What they saw as problem situations for themselves

often differed markedly from what the staff and clients saw as problem situations for them. Moreover, staff and clients often differed from one another. Thus, it would seem important for all such service programs to consider the possibility that such direct service workers may at times find themselves in such an uncomfortable situation. Even so, clients in this homemaker aide program rated all but three of the items as being unimportant. Although role conflict exists at times for the aides in this particular program, it does not appear to interfere with the quality of services delivered--at least as viewed by the program's clients.

References

Butler, R.N. & Lewis, M.I. Aging and mental health: Positive psychosocial approaches. C.V. Mosby, St. Louis, 1977.

Friedman, S.R. Maximizing the quality of home care services for the elderly. Paper presented at the 30th Annual Convention of the Gerontological Society, San Francisco, CA, Nov. 1977.

Smith, B.K. The pursuit of dignity: New living alternatives for the elderly. Beacon Press, Boston, 1978.

Table 1

Mean Rating of 18 Items by Staff Aides and Clients in Rank Order

Issue or Problem area	STAFF	AIDES	CLIENTS	$\bar{X}$
Client tries to get Aide to talk about herself and her other clients	4.0[a]	2.8	4.6[d]	3.9
Client tries to get Aide to talk about religion and politics	2.7	2.7	2.6	2.7
Doctor telling client, "It's just something you have to live with."	3.0	3.1	2.0	2.5
Client tries to get Aide to accept gift	3.5[b]	3.1[c]	1.4	2.3
Aide does not like to fill out time sheet	2.3	2.7	1.7	2.1
Client wants aide to do more than aide is supposed to do	3.8[ab]	1.7	1.7	2.0
Clients are forgetful	3.8[ab]	2.6[c]	1.0	2.0
Client gets upset with Unavoidable schedule changes	3.2[ab]	1.8	1.4	1.8
Inappropriate conversation topics in a small town (i.e. gossiping)	3.5[ab]	1.7	1.2	1.8
Clients do not like to sign time sheet	2.3[a]	1.4	1.8	1.7
Aide wishes to discuss religion and politics	2.3[b]	1.7	1.3	1.6
Aide wishes to talk about herself and other clients	2.6[ab]	1.6[c]	1.0	1.5
Clients accuse Aides of being forgetful	2.0	1.4	1.4	1.5
Clients dislike having to sign a receipt for cash form	3.0[ab]	1.7[c]	.70	1.5
Previous aide providing cleaning supplies	2.6[ab]	1.1	1.9[d]	1.4
Clients not wanting to use thier food stamps	2.6[b]	1.7	1.1	1.4
Clients smoking is annoying	1.9[b]	2.5[c]	.1	1.2
Aide dislikes having to use food stamps for client	2.0[b]	2.1[c]	.1	1.1
$\bar{X}$	2.8[ab]	2.1[c]	1.4	1.9

[a] Staff > Aides, $p < .05$

[b] Staff > Clients, $p < .05$

[c] Aides > Clients, $p < .05$

[d] Clients > Aides, $p < .05$